Card Saco

## R. RAYMOND GREEN, M.D. HOURS: 10-12 A.M. & 2-5 P.M. HEBER GITY, UT 84032 45 SOUTH MAIN 654-1822

		Select Select	0	J.	) "
DATE		2	,	Josef / Doce	
		72	3	)(asm	
		19801	7	memange/MSD	0
		2110	2	men	
ADDRESS _	24	4	<	6	)

Label

PRN times Refill

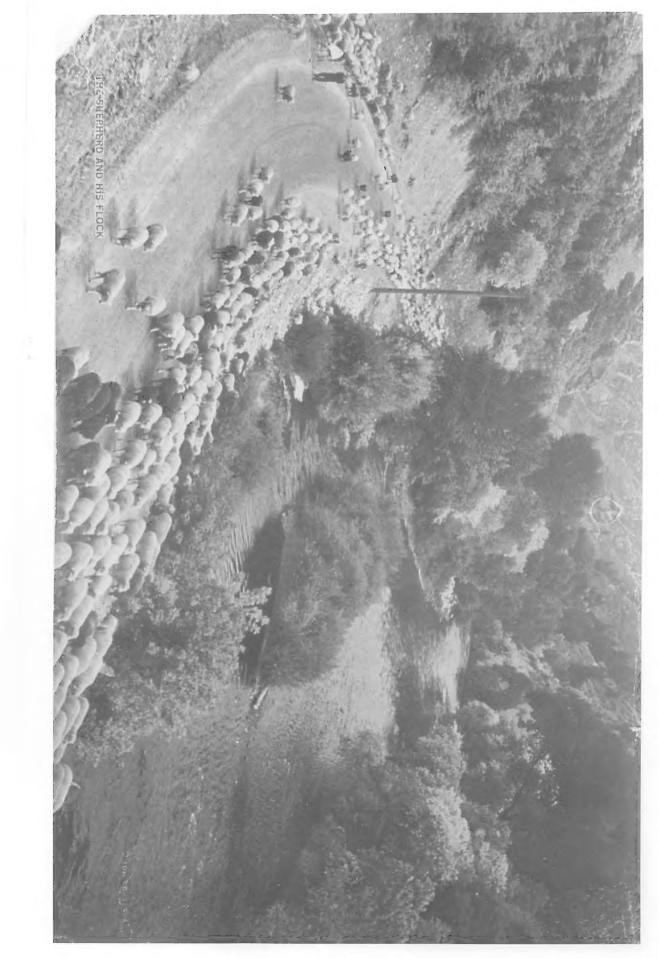
Ľ

Dispense as Written

Substitution Permitted

08/20/90

01-K10580935



Name Address City/State/Zip Phone ( )	COLOR MATERIAL ENCLOSED:  (Check appropriate boxes)  O arv trips	want: size atv. From NegisLibe # #	BLACK & WHITE MATERIAL ENCLOSED:	want: Size QTY. FROM NEGATIVE #
USE THIS ENVELOPE TO ORDER Caution: handle negatives by edges only. Do not cut film strips.	COLOR MAT (Check Slide □ arv. Neg. Strips □ 35 mr	COLOR PRINTS ENLARGEMENTS OUTDITIONATE SLIDES	BLACK & WHITE	BLACK & WHITE PRINTS

(Use this area to indicate finish desired, special services, oversite prints.)
NOTE: This envelope is not intended for permanent storage of negatives or slides.